

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Eastern District of Virginia

Case number (If known): 23-11261-BFK

Chapter you are filing under:

- ☐ Chapter 7
☒ Chapter 11
☐ Chapter 12
☐ Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Valeria First name V. Middle name Gunkova Last name Suffix (Sr., Jr., II, III)	 First name Middle name Last name Suffix (Sr., Jr., II, III)
2. All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and doing business as names. Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.		
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	XXX – XX – 9 5 2 6 OR 9 XX – XX –	XXX – XX – OR 9 XX – XX –

Debtor 1 Valeria V. Gunkova Case number (if known) 23-11261-BFK
First Name Middle Name Last Name

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Your Employer

Identification Number (EIN), if any.

EIN _____

EIN _____

EIN _____

EIN _____

EIN _____

EIN _____

EIN _____

EIN _____

5. Where you live

20701 Riptide Sq.

Number Street

Sterling VA 20165

City State ZIP Code

Loudoun County

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

If Debtor 2 lives at a different address:

Number Street

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number Street

P.O. Box

City State ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

- ☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

- ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Debtor 1

Valeria V. Gunkova

First Name

Middle Name

Last Name

Case number (if known) 23-11261-BFK

Part 2: Tell the Court About Your Bankruptcy Case**7. The chapter of the Bankruptcy Code you are choosing to file under**Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.☐ Chapter 7☒ Chapter 11☐ Chapter 12☐ Chapter 13**8. How you will pay the fee**☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.**9. Have you filed for bankruptcy within the last 8 years?**☒ No☐ Yes.

District _____ When _____ Case number _____

District _____ When _____ Case number _____

District _____ When _____ Case number _____

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?☐ No☒ Yes.

Debtor Sterling Investment, LLC

Relationship to you _____

District Eastern District of Virginia When 07/26/2023 Case number, if known 23-11203-KH

Debtor VNJ Management, LLC

Relationship to you _____

District Eastern District of Virginia When 07/26/2023 Case number, if known 23-11204-BFK

11. Do you rent your residence?☒ No. Go to line 12.☐ Yes. Has your landlord obtained an eviction judgment against you?☐ No. Go to line 12.☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Valeria V. Gunkova

First Name

Middle Name

Last Name

Case number (if known) 23-11261-BFK

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?**☒ No. Go to Part 4.☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))☐ None of the above**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☐ No. I am not filing under Chapter 11.☒ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.☐ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**☒ No☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Debtor 1

Valeria V. Gunkova

First Name

Middle Name

Last Name

Case number (if known) 23-11261-BFK

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

Valeria V. Gunkova

First Name

Middle Name

Last Name

Case number (if known) 23-11261-BFK

Part 6: Answer These Questions for Reporting Purposes**16. What kind of debts do you have?****16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- ☒ No. Go to line 16b.
☐ Yes. Go to line 17.

16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- ☐ No. Go to line 16c.
☒ Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.**17. Are you filing under Chapter 7?**☒ No. I am not filing under Chapter 7. Go to line 18.

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

- ☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☐ No
☐ Yes

18. How many creditors do you estimate that you owe?

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

19. How much do you estimate your assets to be worth?

- | | | |
|--|---|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input checked="" type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

20. How much do you estimate your liabilities to be?

- | | | |
|--|---|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input checked="" type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Part 7: Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Valeria V. Gunkova

Signature of Debtor 1

Executed on 10/31/2023

MM / DD / YYYY

X

Signature of Debtor 2

Executed on

MM / DD / YYYY

Debtor 1

Valeria V. Gunkova

First Name

Middle Name

Last Name

Case number (if known) 23-11261-BFK

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X

/s/ Nancy Greene

Date

10/31/2023

Signature of Attorney for Debtor

MM / DD / YYYY

Nancy Greene

Printed name

N D Greene PC

Firm name

3977 Chain Bridge Rd, Suite 1

Number Street

Fairfax

VA

22030

City

State

ZIP Code

Contact phone + 703 539-0333

Email address ndg@ndglaw.com

38984

VA

Bar number

State

Debtor 1 Valeria V. Gunkova Case number (if known) 23-11261-BFK
First Name Middle Name Last Name

Continuation Sheet for Official Form 101

10) Other bankruptcy cases

**Eastern District of
Virginia**

Debtor 1	Valeria V. Gunkova		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Virginia			
Case number	23-11261-BFK		
(If known)			

Official Form 104

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

			Unsecured claim	
1	Harry Kamin		What is the nature of the claim?	Lawsuit
	Creditor's Name		As of the date you file, the claim is:	Check all that apply.
	320 S Surf Road		<input checked="" type="checkbox"/> Contingent	
	Number Street		<input checked="" type="checkbox"/> Unliquidated	
	Apt 504		<input checked="" type="checkbox"/> Disputed	
		<input type="checkbox"/> None of the above apply		\$ 14,000,000.00
Hollywood		FL	33019	
City State ZIP Code				
Contact		Does the creditor have a lien on your property?		
		<input checked="" type="checkbox"/> No		
Contact phone		<input type="checkbox"/> Yes. Total claim (secured and unsecured): \$		
		Value of security: - \$		
		Unsecured claim \$		
2	Atlantic Union		What is the nature of the claim?	Guarantee of Business Debt
	Creditor's Name		As of the date you file, the claim is:	Check all that apply.
	1051 East Cary Street		<input checked="" type="checkbox"/> Contingent	
	Number Street		<input type="checkbox"/> Unliquidated	
			<input type="checkbox"/> Disputed	
		<input type="checkbox"/> None of the above apply		\$ 6,792,097.00
Richmond		VA	23219	
City State ZIP Code				
Contact		Does the creditor have a lien on your property?		
		<input checked="" type="checkbox"/> No		
Contact phone		<input type="checkbox"/> Yes. Total claim (secured and unsecured): \$		
		Value of security: - \$		
		Unsecured claim \$		

Debtor 1

Valeria V. Gunkova

First Name

Middle Name

Last Name

Case number (if known) 23-11261-BFK

Unsecured claim

3

SBA

Creditor's Name

409 3rd Street

Number Street

Washington

DC

20416

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? Guarantee of business loan

\$500,000.00

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

4

Cadence Bank

Creditor's Name

1068 E Alameda Dr

Number Street

Houston

TX

77210

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? Guarantee of Business Debt

\$340,000.00

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

5

SBA

Creditor's Name

409 3rd Street

Number Street

Washington

DC

20416

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? _____

\$148,538.00

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

6

The Law Office of Jay M McDannell PLLC

Creditor's Name

10617 Jones St

Number Street

#301A

Fairfax

VA

22030

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? Legal Fees

\$93,965.80

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

7

KL Discovery Ontrack LLC

Creditor's Name

9023 Columbine Road

Number Street

Eden Prairie

MN

55347

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? Data hosting

\$30,085.70

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Debtor 1 Valeria V. Gunkova
First Name Middle Name Last Name

Case number (if known) 23-11261-BFK

		Unsecured claim	
8	Capital One Creditor's Name Number Street City State ZIP Code Contact Contact phone	What is the nature of the claim? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ Value of security: - \$ Unsecured claim \$	\$ 17,638.72
9	American Express Creditor's Name PO Box 650448 Number Street Dallas TX 75265 City State ZIP Code Contact Contact phone	What is the nature of the claim? Credit Card Debt As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ Value of security: - \$ Unsecured claim \$	\$ 14,949.38
10	Cameron/ McEvoy Creditor's Name 4100 Monument Corner Drive Number Street Suite 420 Fairfax VA 22030 City State ZIP Code Contact Contact phone	What is the nature of the claim? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ Value of security: - \$ Unsecured claim \$	\$ 10,816.42
11	Citi Creditor's Name PO Box 9001037 Number Street Louisville KY 40290 City State ZIP Code Contact Contact phone	What is the nature of the claim? Credit Card Debt As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ Value of security: - \$ Unsecured claim \$	\$ 9,840.11
12	Discover Creditor's Name PO Box 6103 Number Street Carol Stream IL 60197 City State ZIP Code Contact Contact phone	What is the nature of the claim? Credit Card Debt As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ Value of security: - \$ Unsecured claim \$	\$ 9,362.70

Debtor 1 Valeria V. Gunkova
First Name Middle Name Last Name

Case number (if known) 23-11261-BFK

Unsecured claim

13 American Express Creditor's Name PO Box 650448 Number Street Dallas TX 75265 City State ZIP Code Contact Contact phone	What is the nature of the claim? Credit Card Debt As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$7,611.30
14 TD Bank Creditor's Name PO Box 100114 Number Street Columbia SC 29202 City State ZIP Code Contact Contact phone	What is the nature of the claim? Credit Card Debt As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$6,451.46
15 Capital One Creditor's Name P O Box 71087 Number Street Charlotte NC 28272-1087 City State ZIP Code Contact Contact phone	What is the nature of the claim? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$2,578.89
16 State Farm/ US Bank Creditor's Name P O Box 790408 Number Street St Louis MO 63179-0408 City State ZIP Code Contact Contact phone	What is the nature of the claim? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$728.90
17 Creditor's Name Number Street City State ZIP Code Contact Contact phone	What is the nature of the claim? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured): \$ _____ Value of security: - \$ _____ Unsecured claim \$ _____	\$

Debtor 1

Valeria V. Gunkova

First Name

Middle Name

Last Name

Case number (if known) 23-11261-BFK

Unsecured claim

18

Creditor's Name

Number

Street

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

19

Creditor's Name

Number

Street

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

20

Creditor's Name

Number

Street

City

State

ZIP Code

Contact

Contact phone

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Debtor 1

Valeria V. Gunkova

Document Page 14 of 43

Case number (if known) 23-11261-BFK

First Name

Middle Name

Last Name

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

X /s/ Valeria V. Gunkova

Signature of Debtor 1

X

Signature of Debtor 2

Date 10/31/2023

MM / DD / YYYY

Date 10/31/2023

MM / DD / YYYY

Debtor 1 Valeria Gunkova
 First Name Middle Name Last Name

Case number (if known) 23-11261-BFK

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☒ Yes

7. What kind of debt do you have?

- ☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
☒ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ _____

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*.

Total claim

From Part 4 on *Schedule E/F*, copy the following:

- 9a. Domestic support obligations (Copy line 6a.) \$ _____
 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ _____
 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ _____
 9d. Student loans. (Copy line 6f.) \$ _____
 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$ _____
 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$ _____
 9g. **Total.** Add lines 9a through 9f. \$ _____

Fill in this information to identify your case and this filing:

Debtor 1 Valeria V. Gunkova
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing)
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Virginia

Case number 23-11261-BFK
(if know)

☒ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☒ No. Go to Part 2
☐ Yes. Where is the property?

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☒ No
☐ Yes

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages

you have attached for Part 2. Write that number here.....>

\$0.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- ☒ No
☐ Yes. Describe...

Do not deduct secured claims or exemptions.

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☒ No
☐ Yes. Describe...

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- ☒ No
☐ Yes. Describe...

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- ☒ No
☐ Yes. Describe...

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

- ☒ No
☐ Yes. Describe...

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- ☒ No
☐ Yes. Describe...

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems gold, silver

- ☒ No
☐ Yes. Describe...

13. Non-farm animals

Examples: Dogs, cats, birds, horses

- ☒ No
☐ Yes. Describe...

14. Any other personal and household items you did not already list, including any health aids you did not list

- ☒ No
☐ Yes. Give specific information...

15. Add the dollar value of the portion you own for all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here.....

\$0.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☐ No
☒ Yes..... Cash \$ 250.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses and other similar institutions. If you have multiple accounts with the same institution, list each.

- ☐ No
☒ Yes..... Institution name:
- | | | |
|--------------------------------|--------------------|------------------|
| 17.1. Checking account: | TD Bank - 8021 | \$ <u>100.00</u> |
| 17.2. Checking account: | Wells Fargo - 0217 | \$ <u>50.00</u> |
| 17.3. Other financial account: | PayPal | \$ <u>0.00</u> |
| 17.4. Savings account: | Wells Fargo - 3914 | \$ <u>50.00</u> |

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- ☒ No
☐ Yes.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☐ No☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

BNG Group LLC

50 %

\$ 11,800,000.00

Sterling Investment LLC

100 %

\$ Unknown

VNJ Management LLC

100 %

\$ Unknown

Skin Logic LLC

100 %

\$ 2,800,000.00

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No☐ Yes. Give specific information about them.....**21. Retirement or pension accounts**

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No☐ Yes. List each account separately**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No☐ Yes.....**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes.....**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes.....**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**☒ No☐ Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No☐ Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No☐ Yes. Give specific information about them...**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you☐ No☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years...

Virginia 2022 Tax refund, 2022 Federal Tax Refund

Federal:

\$ 2,992.00

State:

\$ 3,217.00

Local:

\$ 0.00

Debtor 1

Valeria V. Gunkova

First Name

Middle Name

Last Name

Document

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Case number(if known) 23-11261-BFK

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☒ No☐ Yes. Give specific information....**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☒ No☐ Yes. Give specific information....**31. Interests in insurance policies**☒ No☐ Yes. Name the insurance company of each policy and list its value....**32. Any interest in property that is due you from someone who has died**☒ No☐ Yes. Give specific information....**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**☒ No☐ Yes. Give specific information....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☐ No☒ Yes. Give specific information....

Harry Kamin, BNG Group LLC

\$ Unknown

35. Any financial assets you did not already list☒ No☐ Yes. Give specific information...**36. Add the dollar value of the portion you own for all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....>**

\$ 14,606,659.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6.☐ Yes. Go to line 38.**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?☒ No. Go to Part 7.☐ Yes. Go to line 47.**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?***Examples:* Season tickets, country club membership☒ No☐ Yes. Give specific information...**54. Add the dollar value of all of your entries from Part 7. Write that number here>**

\$ 0.00

Debtor 1

Valeria V. Gunkova

First Name

Middle Name

Last Name

Document

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Case number(if known) 23-11261-BFK

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2.....>		\$ 0.00
56. Part 2: Total vehicles, line 5	\$ 0.00	
57. Part 3: Total personal and household items, line 15	\$ 0.00	
58. Part 4: Total financial assets, line 36	\$ 14,606,659.00	
59. Part 5: Total business-related property, line 45	\$ 0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00	
61. Part 7: Total other property not listed, line 54	+ \$ 0.00	
62. Total personal property. Add lines 56 through 61	\$ 14,606,659.00	Copy personal property total▶ + \$
		14,606,659.00
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$ 14,606,659.00

Fill in this information to identify your case:

Debtor 1	Valeria V. Gunkova		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Virginia			
Case number (if known)	23-11261-BFK		

☒ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt**1. Which set of exemptions are you claiming?** Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
TD Bank - 8021 (Checking Account) Brief description: Line from Schedule A/B: 17.1	\$ 100.00	<input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4; Va. Code Ann. § 34-18; Va. Code Ann. § 34-20
Wells Fargo - 0217 (Checking Account) Brief description: Line from Schedule A/B: 17.2	\$ 50.00	<input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4; Va. Code Ann. § 34-18; Va. Code Ann. § 34-20
Wells Fargo - 3914 (Savings Account) Brief description: Line from Schedule A/B: 17.4	\$ 50.00	<input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4; Va. Code Ann. § 34-18; Va. Code Ann. § 34-20

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor

Valeria V. Gunkova

Document

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Case number (if known) 23-11261-BFK

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
BNG Group LLC			
Brief description:	\$ 11,800,000.00	<input checked="" type="checkbox"/> \$ 1.00	Va. Code Ann. § 34-4; Va. Code Ann. § 34-18; Va. Code Ann. § 34-20
Line from Schedule A/B: 19		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Sterling Investment LLC			
Brief description:	\$ Unknown	<input checked="" type="checkbox"/> \$ 1.00	Va. Code Ann. § 34-4; Va. Code Ann. § 34-18; Va. Code Ann. § 34-20
Line from Schedule A/B: 19		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
VNJ Management LLC			
Brief description:	\$ Unknown	<input checked="" type="checkbox"/> \$ 1.00	Va. Code Ann. § 34-4; Va. Code Ann. § 34-18; Va. Code Ann. § 34-20
Line from Schedule A/B: 19		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Skin Logic LLC			
Brief description:	\$ 2,800,000.00	<input checked="" type="checkbox"/> \$ 1.00	Va. Code Ann. § 34-4; Va. Code Ann. § 34-18; Va. Code Ann. § 34-20
Line from Schedule A/B: 19		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Virginia 2022 Tax refund (owed to debtor)			
Brief description:	\$ 3,217.00	<input checked="" type="checkbox"/> \$ 1,998.00	Va. Code Ann. § 34-4; Va. Code Ann. § 34-18; Va. Code Ann. § 34-20
Line from Schedule A/B: 28		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
2022 Federal Tax Refund (owed to debtor)			
Brief description:	\$ 2,992.00	<input checked="" type="checkbox"/> \$ 2,992.00	Va. Code Ann. § 34-4; Va. Code Ann. § 34-18; Va. Code Ann. § 34-20
Line from Schedule A/B: 28		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your case:

Debtor 1 Valeria V. Gunkova
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) _____
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Virginia

Case number (if know) 23-11261-BFK

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing else to report in this part. Submit to the court with your other schedules.
☒ Yes. Fill in all of the information below.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1	<p>American Express Nonpriority Creditor's Name PO Box 650448 Number Street Dallas TX 75265 City State ZIP Code</p> <p>Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 2007</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	<p>\$ <u>14,949.38</u></p>
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4.2	American Express Nonpriority Creditor's Name PO Box 650448 Number Street Dallas TX 75265 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 2004 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	\$ <u>7,611.30</u>
4.3	Atlantic Union Nonpriority Creditor's Name 1051 East Cary Street Number Street Richmond VA 23219 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 6666 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Guarantee of Business Debt	\$ <u>6,792,097.00</u>
4.4	Cadence Bank Nonpriority Creditor's Name 1068 E Alameda Dr Number Street Houston TX 77210 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Guarantee of Business Debt	\$ <u>340,000.00</u>

4.5	<div>Cameron/ McEvoy</div> <div>Nonpriority Creditor's Name</div> <div>4100 Monument Corner Drive</div> <div>Number Street</div> <div>Suite 420</div> <div>Fairfax VA 22030</div> <div>City State ZIP Code</div> <div>Who owes the debt? Check one.</div> <div><div><input type="checkbox"/> Debtor 1 only</div><div><input type="checkbox"/> Debtor 2 only</div><div><input type="checkbox"/> Debtor 1 and Debtor 2 only</div><div><input checked="" type="checkbox"/> At least one of the debtors and another</div><div><input type="checkbox"/> Check if this claim relates to a community debt</div></div> <div>Is the claim subject to offset?</div> <div><div><input checked="" type="checkbox"/> No</div><div><input type="checkbox"/> Yes</div></div>	<div>Last 4 digits of account number</div> <div>When was the debt incurred?</div> <div>As of the date you file, the claim is: Check all that apply.</div> <div><div><input type="checkbox"/> Contingent</div><div><input type="checkbox"/> Unliquidated</div><div><input type="checkbox"/> Disputed</div></div> <div>Type of NONPRIORITY unsecured claim:</div> <div><div><input type="checkbox"/> Student loans</div><div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div><div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div><div><input checked="" type="checkbox"/> Other. Specify</div></div>	<div>\$ 10,816.42</div>
4.6	<div>Capital One</div> <div>Nonpriority Creditor's Name</div> <div>P O Box 71087</div> <div>Number Street</div> <div>Charlotte NC 28272-1087</div> <div>City State ZIP Code</div> <div>Who owes the debt? Check one.</div> <div><div><input checked="" type="checkbox"/> Debtor 1 only</div><div><input type="checkbox"/> Debtor 2 only</div><div><input type="checkbox"/> Debtor 1 and Debtor 2 only</div><div><input type="checkbox"/> At least one of the debtors and another</div><div><input type="checkbox"/> Check if this claim relates to a community debt</div></div> <div>Is the claim subject to offset?</div> <div><div><input checked="" type="checkbox"/> No</div><div><input type="checkbox"/> Yes</div></div>	<div>Last 4 digits of account number 8653</div> <div>When was the debt incurred?</div> <div>As of the date you file, the claim is: Check all that apply.</div> <div><div><input type="checkbox"/> Contingent</div><div><input type="checkbox"/> Unliquidated</div><div><input type="checkbox"/> Disputed</div></div> <div>Type of NONPRIORITY unsecured claim:</div> <div><div><input type="checkbox"/> Student loans</div><div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div><div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div><div><input checked="" type="checkbox"/> Other. Specify</div></div>	<div>\$ 2,578.89</div>
4.7	<div>Capital One</div> <div>Nonpriority Creditor's Name</div> <div></div> <div>Number Street</div> <div></div> <div>City State ZIP Code</div> <div>Who owes the debt? Check one.</div> <div><div><input checked="" type="checkbox"/> Debtor 1 only</div><div><input type="checkbox"/> Debtor 2 only</div><div><input type="checkbox"/> Debtor 1 and Debtor 2 only</div><div><input type="checkbox"/> At least one of the debtors and another</div><div><input type="checkbox"/> Check if this claim relates to a community debt</div></div> <div>Is the claim subject to offset?</div> <div><div><input checked="" type="checkbox"/> No</div><div><input type="checkbox"/> Yes</div></div>	<div>Last 4 digits of account number 3853</div> <div>When was the debt incurred?</div> <div>As of the date you file, the claim is: Check all that apply.</div> <div><div><input type="checkbox"/> Contingent</div><div><input type="checkbox"/> Unliquidated</div><div><input type="checkbox"/> Disputed</div></div> <div>Type of NONPRIORITY unsecured claim:</div> <div><div><input type="checkbox"/> Student loans</div><div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div><div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div><div><input checked="" type="checkbox"/> Other. Specify</div></div>	<div>\$ 17,638.72</div>

4.8	<div>Citi</div> <div>Nonpriority Creditor's Name</div> <div>PO Box 9001037</div> <div>Number Street</div> <div>Louisville KY 40290</div> <div>City State ZIP Code</div> <div>Who owes the debt? Check one.</div> <div><input checked="" type="checkbox"/> Debtor 1 only</div> <div><input type="checkbox"/> Debtor 2 only</div> <div><input type="checkbox"/> Debtor 1 and Debtor 2 only</div> <div><input type="checkbox"/> At least one of the debtors and another</div> <div><input type="checkbox"/> Check if this claim relates to a community debt</div> <div>Is the claim subject to offset?</div> <div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div>	<div>Last 4 digits of account number 6899</div> <div>When was the debt incurred? _____</div> <div>As of the date you file, the claim is: Check all that apply.</div> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> <div>Type of NONPRIORITY unsecured claim:</div> <div><input type="checkbox"/> Student loans</div> <div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div> <div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div> <div><input checked="" type="checkbox"/> Other. Specify Credit Card Debt</div>	<div>\$ 9,840.11</div>
4.9	<div>Discover</div> <div>Nonpriority Creditor's Name</div> <div>PO Box 6103</div> <div>Number Street</div> <div>Carol Stream IL 60197</div> <div>City State ZIP Code</div> <div>Who owes the debt? Check one.</div> <div><input checked="" type="checkbox"/> Debtor 1 only</div> <div><input type="checkbox"/> Debtor 2 only</div> <div><input type="checkbox"/> Debtor 1 and Debtor 2 only</div> <div><input type="checkbox"/> At least one of the debtors and another</div> <div><input type="checkbox"/> Check if this claim relates to a community debt</div> <div>Is the claim subject to offset?</div> <div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div>	<div>Last 4 digits of account number 2144</div> <div>When was the debt incurred? _____</div> <div>As of the date you file, the claim is: Check all that apply.</div> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> <div>Type of NONPRIORITY unsecured claim:</div> <div><input type="checkbox"/> Student loans</div> <div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div> <div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div> <div><input checked="" type="checkbox"/> Other. Specify Credit Card Debt</div>	<div>\$ 9,362.70</div>
4.10	<div>Harry Kamin</div> <div>Nonpriority Creditor's Name</div> <div>320 S Surf Road</div> <div>Number Street</div> <div>Apt 504</div> <div>Hollywood FL 33019</div> <div>City State ZIP Code</div> <div>Who owes the debt? Check one.</div> <div><input type="checkbox"/> Debtor 1 only</div> <div><input type="checkbox"/> Debtor 2 only</div> <div><input type="checkbox"/> Debtor 1 and Debtor 2 only</div> <div><input checked="" type="checkbox"/> At least one of the debtors and another</div> <div><input type="checkbox"/> Check if this claim relates to a community debt</div> <div>Is the claim subject to offset?</div> <div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div>	<div>Last 4 digits of account number</div> <div>When was the debt incurred? 6/20/2023</div> <div>As of the date you file, the claim is: Check all that apply.</div> <div><input checked="" type="checkbox"/> Contingent</div> <div><input checked="" type="checkbox"/> Unliquidated</div> <div><input checked="" type="checkbox"/> Disputed</div> <div>Type of NONPRIORITY unsecured claim:</div> <div><input type="checkbox"/> Student loans</div> <div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div> <div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div> <div><input checked="" type="checkbox"/> Other. Specify Lawsuit</div>	<div>\$ 14,000,000.00</div>

4.11	KL Discovery Ontrack LLC Nonpriority Creditor's Name 9023 Columbine Road Number Street Eden Prairie MN 55347 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 8009360 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Data hosting	\$ <u>30,085.70</u>
4.12	SBA Nonpriority Creditor's Name 409 3rd Street Number Street Washington DC 20416 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 7907 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify	\$ <u>148,538.00</u>
4.13	SBA Nonpriority Creditor's Name 409 3rd Street Number Street Washington DC 20416 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 7208 When was the debt incurred? <u>2/3/2021</u> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Guarantee of business loan	\$ <u>500,000.00</u>

4.14	<div>State Farm/ US Bank</div> <div>Nonpriority Creditor's Name</div> <div>P O Box 790408</div> <div>Number Street</div> <div>St Louis MO 63179-0408</div> <div>City State ZIP Code</div> <div>Who owes the debt? Check one.</div> <div><input checked="" type="checkbox"/> Debtor 1 only</div> <div><input type="checkbox"/> Debtor 2 only</div> <div><input type="checkbox"/> Debtor 1 and Debtor 2 only</div> <div><input type="checkbox"/> At least one of the debtors and another</div> <div><input type="checkbox"/> Check if this claim relates to a community debt</div> <div>Is the claim subject to offset?</div> <div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div>	<div>Last 4 digits of account number 9687</div> <div>When was the debt incurred? _____</div> <div>As of the date you file, the claim is: Check all that apply.</div> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> <div>Type of NONPRIORITY unsecured claim:</div> <div><input type="checkbox"/> Student loans</div> <div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div> <div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div> <div><input checked="" type="checkbox"/> Other. Specify</div>
4.15	<div>TD Bank</div> <div>Nonpriority Creditor's Name</div> <div>PO Box 100114</div> <div>Number Street</div> <div>Columbia SC 29202</div> <div>City State ZIP Code</div> <div>Who owes the debt? Check one.</div> <div><input checked="" type="checkbox"/> Debtor 1 only</div> <div><input type="checkbox"/> Debtor 2 only</div> <div><input type="checkbox"/> Debtor 1 and Debtor 2 only</div> <div><input type="checkbox"/> At least one of the debtors and another</div> <div><input type="checkbox"/> Check if this claim relates to a community debt</div> <div>Is the claim subject to offset?</div> <div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div>	<div>Last 4 digits of account number 5242</div> <div>When was the debt incurred? _____</div> <div>As of the date you file, the claim is: Check all that apply.</div> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> <div>Type of NONPRIORITY unsecured claim:</div> <div><input type="checkbox"/> Student loans</div> <div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div> <div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div> <div><input checked="" type="checkbox"/> Other. Specify Credit Card Debt</div>
4.16	<div>The Law Office of Jay M McDannell PLLC</div> <div>Nonpriority Creditor's Name</div> <div>10617 Jones St</div> <div>Number Street</div> <div>#301A</div> <div>Fairfax VA 22030</div> <div>City State ZIP Code</div> <div>Who owes the debt? Check one.</div> <div><input type="checkbox"/> Debtor 1 only</div> <div><input type="checkbox"/> Debtor 2 only</div> <div><input type="checkbox"/> Debtor 1 and Debtor 2 only</div> <div><input checked="" type="checkbox"/> At least one of the debtors and another</div> <div><input type="checkbox"/> Check if this claim relates to a community debt</div> <div>Is the claim subject to offset?</div> <div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div>	<div>Last 4 digits of account number</div> <div>When was the debt incurred? _____</div> <div>As of the date you file, the claim is: Check all that apply.</div> <div><input type="checkbox"/> Contingent</div> <div><input type="checkbox"/> Unliquidated</div> <div><input type="checkbox"/> Disputed</div> <div>Type of NONPRIORITY unsecured claim:</div> <div><input type="checkbox"/> Student loans</div> <div><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</div> <div><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</div> <div><input checked="" type="checkbox"/> Other. Specify Legal Fees</div>

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Bethany R. Benes
Creditor's Name
3975 Fair Ridge Dr
Number Street
South Suite 246
Fairfax VA 22033
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ 0.00
	6b. Taxes and certain other debts you owe the government	6b. \$ 0.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ 0.00
	6e. Total. Add lines 6a through 6d.	6e. \$ 0.00
Total claims from Part 2	6f. Student loans	6f. \$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ 21,984,664.38
	6j. Total. Add lines 6f through 6i.	6j. \$ 21,984,664.38

Fill in this information to identify your case:

Debtor 1 Valeria V. Gunkova
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) _____
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Virginia

Case number (if know) 23-11261-BFK

☒ Check if this is
an amended
filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1 KL Discovery Name 9023 Columbine Road Street Eden Prairie MN 55347 City State ZIP Code	Hosting for discovery documents in Kamin v. Gunkova Purchaser

Fill in this information to identify your case:

Debtor 1 Valeria V. Gunkova
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) _____
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Virginia

Case number 23-11261-BFK
(if know)

☒ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☐ No
☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1	<u>BNG Group LLC</u> Name <u>2 Pigeon Hill Dr Ste 110</u> Street <u>Sterling</u> VA <u>22165</u> City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.13</u> <input type="checkbox"/> Schedule G, line ____
3.2	<u>BNG Group LLC</u> Name <u>2 Pigeon Hill Dr Ste 110</u> Street <u>Sterling</u> VA <u>22165</u> City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.3</u> <input type="checkbox"/> Schedule G, line ____
3.3	<u>Harry Kamin c/o Bethany Benes</u> Name <u>3975 Fair Ridge Dr South Suite 246</u> Street <u>Fairfax</u> VA <u>22033</u> City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.13</u> <input type="checkbox"/> Schedule G, line ____
3.4	<u>Harry Kamin c/o Bethany Benes</u> Name <u>3975 Fair Ridge Dr South Suite 246</u> Street <u>Fairfax</u> VA <u>22033</u> City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.3</u> <input type="checkbox"/> Schedule G, line ____

3.5	Skin Logic LLC Name 2 Pigeon Hill Dr Ste 110 Street Sterling VA 22165 City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input type="checkbox"/> Schedule E/F, line ____ <input type="checkbox"/> Schedule G, line ____
3.6	Skin Logic LLC Name 2 Pigeon Hill Dr Ste 110 Street Sterling VA 22165 City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.10</u> <input type="checkbox"/> Schedule G, line ____
3.7	Skin Logic LLC Name 2 Pigeon Hill Dr Ste 110 Street Sterling VA 22165 City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.4</u> <input type="checkbox"/> Schedule G, line ____
3.8	Sterling Investment LLC Name 2 Pigeon Hill Dr Ste 110 Street Sterling VA 22165 City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.13</u> <input type="checkbox"/> Schedule G, line ____
3.9	Sterling Investments Name 2 Pigeon Hill Dr Ste 110 Street Sterling VA 22165 City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.10</u> <input type="checkbox"/> Schedule G, line ____
3.10	VNJ Management Name 2 Pigeon Hill Dr Ste 110 Street Sterling VA 22165 City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.10</u> <input type="checkbox"/> Schedule G, line ____
3.11	BNG Group LLC Name 2 Pigeon Hill Dr Ste 110 Street Sterling VA 22165 City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input type="checkbox"/> Schedule E/F, line ____ <input checked="" type="checkbox"/> Schedule G, line <u>2.1</u>
3.12	Skin Logic LLC Name 2 Pigeon Hill Dr Ste 110 Street Sterling VA 22165 City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.14</u> <input type="checkbox"/> Schedule G, line ____
3.13	Harry Kamin c/o Bethany Benes Name 3975 Fair Ridge Dr South Suite 246 Street Fairfax VA 22033 City State ZIP Code	<input type="checkbox"/> Schedule D, line ____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.12</u> <input type="checkbox"/> Schedule G, line ____

3.14

BNG Group LLC

Name

2 Pigeon Hill Dr Ste 110

Street

Sterling

VA

22165

City

State

ZIP Code

☐ Schedule D, line ____☒ Schedule E/F, line 4.12☐ Schedule G, line ____

3.15

Jacob Bogatin

Name

20701 Riptide Square

Street

Sterling

VA

20165

City

State

ZIP Code

☐ Schedule D, line ____☒ Schedule E/F, line 4.16☐ Schedule G, line ____

3.16

Jacob Bogatin

Name

20701 Riptide Square

Street

Sterling

VA

20165

City

State

ZIP Code

☐ Schedule D, line ____☒ Schedule E/F, line 4.5☐ Schedule G, line ____

3.17

Jacob Bogatin

Name

20701 Riptide Square

Street

Sterling

VA

20165

City

State

ZIP Code

☐ Schedule D, line ____☒ Schedule E/F, line 4.11☐ Schedule G, line ____

page 1

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.	\$ 6,200.00	\$
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 1,271.10	\$
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$
5e. Insurance	5e. \$ 214.00	\$
5f. Domestic support obligations	5f. \$ 0.00	\$
5g. Union dues	5g. \$ 0.00	\$
5h. Other deductions. Specify: _____	5h. + \$ 0.00	+ \$
_____	\$	\$
_____	\$	\$
_____	\$	\$
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 1,485.10	\$
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 4,714.90	\$
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$
8b. Interest and dividends	8b. \$ 0.00	\$
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$
8d. Unemployment compensation	8d. \$ 0.00	\$
8e. Social Security	8e. \$ 0.00	\$
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$
8g. Pension or retirement income	8g. \$ 0.00	\$
8h. Other monthly income. Specify: _____	8h. + \$ 0.00	+ \$
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 0.00	\$
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 4,714.90 +	\$ = \$ 4,714.90
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
		11. + \$
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12. \$ 4,714.90 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input type="checkbox"/> No. Starting on 11-1-23, Jacob Bogatin will contribute 50% of the household expenses based on his drawing a <input checked="" type="checkbox"/> Yes. Explain: salary from Skin Logic LLC in the approximate amount of \$1,285 per month.		

Fill in this information to identify your case:

Debtor 1 Valeria V. Gunkova
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Virginia (State)

Case number 23-11261-BFK
 (If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:
- MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☒ No

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No

☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 600.17

If not included in line 4:

4a. Real estate taxes

4a. \$ 198.20

4b. Property, homeowner's, or renter's insurance

4b. \$ 106.40

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 69.50

4d. Homeowner's association or condominium dues

4d. \$ 101.18

Debtor 1 Valeria V. Gunkova
First Name Middle Name Last Name

Case number (if known) 23-11261-BFK

	Your expenses
5. Additional mortgage payments for your residence , such as home equity loans	5. \$ <u>1,694.00</u>
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ <u>228.74</u>
6b. Water, sewer, garbage collection	6b. \$ <u>62.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>75.33</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>
7. Food and housekeeping supplies	7. \$ <u>440.00</u>
8. Childcare and children's education costs	8. \$ <u>0.00</u>
9. Clothing, laundry, and dry cleaning	9. \$ <u>50.00</u>
10. Personal care products and services	10. \$ <u>0.00</u>
11. Medical and dental expenses	11. \$ <u>0.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>105.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <u>0.00</u>
14. Charitable contributions and religious donations	14. \$ <u>0.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ <u>0.00</u>
15b. Health insurance	15b. \$ <u>0.00</u>
15c. Vehicle insurance	15c. \$ <u>148.00</u>
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ <u>617.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ <u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$ <u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>

Debtor 1 Valeria V. Gunkova
 First Name Middle Name Last Name

Case number (if known) 23-11261-BFK

21. **Other.** Specify: _____

21. +\$ 0.00
 +\$
 +\$

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$ 4,495.52

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.

22b. \$

22c. \$ 4,495.52

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 4,714.90

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 4,495.52

23c. Subtract your monthly expenses from your monthly income.
 The result is your *monthly net income*.

23c. \$ 219.38

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 Valeria V. Gunkova
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing)
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Virginia

Case number 23-11261-BFK
 (if known)

☐ Check if this is an amended filing

Official Form 122B

Chapter 11 Statement of Your Current Monthly Income

12/21

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11 (other than Subchapter V). If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- ☒ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you.** Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2																
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 6,200.00	\$ 0.00																
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$ 0.00																
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00																
5. Net income from operating a business, profession, or farm	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions) \$ 0.00</td> <td>\$ 0.00</td> </tr> <tr> <td>Ordinary and necessary operating expenses - \$ 0.00</td> <td>- \$ 0.00</td> </tr> <tr> <td>Net monthly income from a business, profession, or farm \$ 0.00</td> <td>\$ 0.00</td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions) \$ 0.00	\$ 0.00	Ordinary and necessary operating expenses - \$ 0.00	- \$ 0.00	Net monthly income from a business, profession, or farm \$ 0.00	\$ 0.00	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions) \$ 0.00</td> <td>\$ 0.00</td> </tr> <tr> <td>Ordinary and necessary operating expenses - \$ 0.00</td> <td>- \$ 0.00</td> </tr> <tr> <td>Net monthly income from rental or other real property \$ 0.00</td> <td>\$ 0.00</td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions) \$ 0.00	\$ 0.00	Ordinary and necessary operating expenses - \$ 0.00	- \$ 0.00	Net monthly income from rental or other real property \$ 0.00	\$ 0.00
Debtor 1	Debtor 2																	
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Debtor 1 Valeria V. Gunkova
First Name Middle Name Last Name

Case number (if known) 23-11261-BFK

	Column A Debtor 1	Column B Debtor 2
7. Interest, dividends, and royalties	\$ 0.00	\$ 0.00
8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ For your spouse \$	\$ 0.00	\$ 0.00
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$ 0.00	\$ 0.00
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.	\$ 0.00 \$ 0.00 + \$ 0.00	\$ 0.00 \$ 0.00 + \$ 0.00
Total amounts from separate pages, if any.	\$ 6,200.00	\$ 0.00
11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$ 6,200.00	\$ 0.00
	Total current monthly income \$ 6,200.00	

Part 2: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Valeria V. Gunkova
Signature of Debtor 1
Date 10/31/2023
MM / DD / YYYY

X
Signature of Debtor 2
Date 10/31/2023
MM / DD / YYYY

American Express
PO Box 650448
Dallas, TX 75265

Atlantic Union
1051 East Cary Street
Richmond, VA 23219

Bethany R. Benes
3975 Fair Ridge Dr
South Suite 246
Fairfax, VA 22033

Cadence Bank
1068 E Alameda Dr
Houston, TX 77210

Cameron/ McEvoy
4100 Monument Corner Drive
Suite 420
Fairfax, VA 22030

Capital One

Capital One
P O Box 71087
Charlotte, NC 28272-1087

Citi
PO Box 9001037
Louisville, KY 40290

Discover
PO Box 6103
Carol Stream, IL 60197

Harry Kamin
320 S Surf Road
Apt 504
Hollywood, FL 33019

KL Discovery Ontrack LLC
9023 Columbine Road
Eden Prairie, MN 55347

SBA
409 3rd Street
Washington, DC 20416

State Farm/ US Bank
P O Box 790408
St Louis, MO 63179-0408

TD Bank
PO Box 100114
Columbia, SC 29202

The Law Office of Jay M McDannell PLLC
10617 Jones St
Fairfax, VA 22030

United States Bankruptcy Court
Eastern District of Virginia

In re: Valeria V. Gunkova

Case No. 23-11261-BFK

Chapter 11

Debtor(s)

Verification of Creditor Matrix

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 10/31/2023

/s/ Valeria V. Gunkova

Signature of Debtor

Signature of Joint Debtor